

Department of Social and Health Services

DP Code/Title: M1-94 Mandatory Workload Adjustments

Program Level - 040 Div of Developmental Disab

Budget Period: 2003-05 Version: D1 040 2003-05 Fall Update

Recommendation Summary Text:

This step requests funding for the staffing requirements of caseload growth in the Medicaid Personal Care (MPC) program based on the Caseload Forecast Council (CFC) forecast.

Fiscal Detail:

Operating Expenditures

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
Program 040			
001-1 General Fund - Basic Account-State	1,164,000	2,190,000	3,354,000
001-C General Fund - Basic Account-DSHS Medicaid Federa	713,000	1,343,000	2,056,000
Total Cost	1,877,000	3,533,000	5,410,000

Staffing

	<u>FY 1</u>	<u>FY 2</u>	<u>Annual Avg</u>
Program 040 FTEs	24.0	47.9	36.0

Package Description:

MPC is a legislatively authorized Medicaid State Plan service that provides assistance to individuals needing help with activities of daily living, such as eating, toileting, ambulation, positioning, dressing, bathing, essential shopping, meal preparation, laundry, housework, and supervision. It is an entitlement for every individual who meets the Medicaid financial and program eligibility criteria.

There is a direct relationship with the number of case managers to the number of clients who can be managed in the MPC program. Without the appropriate numbers of case managers, there is a risk that clients will not receive appropriate or cost effective services, and the safety of clients may be at risk. The use of the computer-based Comprehensive Assessment form has proven extremely valuable to measuring and monitoring the needs of Washington State's long-term-care population. These Comprehensive Assessments cannot be kept up-to-date without adequate case managers.

This step requests funding for the workload increase based on the most current CFC forecast of MPC growth for children and adults. Continued growth in MPC reflects the entitlement nature of this Medicaid State Plan service.

Narrative Justification and Impact Statement

How contributes to strategic plan:

The Developmental Disabilities Services (DDS) will effectively and efficiently use resources to accomplish the values, principles, and the mission of the DDS while maintaining accountability for public and client safety.

Performance Measure Detail

Program: 040

Goal: 03D Design/maintain system of residential supports and services

Output Measures

3DA Provide personal care services to those individuals eligible for the State Plan as forecasted by the Caseload Forecast Council

Incremental Changes

<u>FY 1</u>	<u>FY 2</u>
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Reason for change:

Department of Social and Health Services

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Staffing demands are driven by the number of clients receiving services. The CFC is forecasting more clients will be entitled to DDS services in the MPC program.

Impact on clients and services:

Funding the workload change will provide sufficient staff to continue services at the current level.

Impact on other state programs:

None

Relationship to capital budget:

None

Required changes to existing RCW, WAC, contract, or plan:

None

Alternatives explored by agency:

None. The CFC forecast is the accepted method to determine workload adjustments.

Budget impacts in future biennia:

This request is caseload driven. The cost and number of case managers and associated staff required will carry forward into future biennia as adjusted by future caseload forecasts.

Distinction between one-time and ongoing costs:

This package includes one-time equipment costs. The remaining costs are ongoing.

Effects of non-funding:

There is a direct relationship with the number of case managers to the number of clients who can be managed in the MPC program. Without appropriate numbers of case managers, there is a risk that clients will not receive appropriate or cost effective services, and the safety of clients may be at risk. The use of the computer-based Comprehensive Assessment form has proven extremely valuable to measuring and monitoring the needs of Washington State's long term-care population. These Comprehensive Assessments cannot be kept up-to-date without adequate case managers.

Expenditure Calculations and Assumptions:

The CFC forecasts the October 2002 MPC caseload of 11,888 in Fiscal Year 2004 and 12,921 in Fiscal Year 2005. The carry forward funding level is 10,854 in Fiscal Year 2003.

Assumption: It takes 14 hours to add someone to Medicaid Personal Care. The Aging and Adult Services Administration has calculated that the initial assessment time is 14 hours with the new Interim Assessment. This is the total time for phone calls, travel, assessment, computer input, contracting, authorizations, distribution of service plans, and other intake requirements.

Assumption: It takes eight hours to do an annual review or reassessment. It is estimated to be eight hours from start to finish. While this must be conducted in-home and in-person there is time involved with phone calls, scheduling, travel, and assessment interview, but less time than initially because review and assessment information are prepared as amendments to

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the existing service plan. The clients generally have services and are not in need of new providers, different contract, arrangements, or other Department of Social and Health Services services.

Assumption: There are 1,296 hours annually available for a Case/Resource Manager FTE for case management, resource management, or intake activities. This was recorded in the Appendix H (page H-13) of the Workload Standards Study Technical Report: Case/Resource Management in DDS (March 1999).

See attachment - DDS M1-94 Mandatory Workload Adjustments.xls

Object Detail

Program 040 Objects

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
A Salaries And Wages	1,080,000	2,146,000	3,226,000
B Employee Benefits	267,000	530,000	797,000
E Goods And Services	401,000	599,000	1,000,000
G Travel	86,000	173,000	259,000
T Intra-Agency Reimbursements	43,000	85,000	128,000
Total Objects	1,877,000	3,533,000	5,410,000

DSHS Source Code Detail

Program 040

Fund 001-1, General Fund - Basic Account-State

Sources Title

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
0011 General Fund State	1,164,000	2,190,000	3,354,000
Total for Fund 001-1	1,164,000	2,190,000	3,354,000

Fund 001-C, General Fund - Basic Account-DSHS Medicaid Federa

Sources Title

	<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
19TA Title XIX Assistance (FMAP)	713,000	1,343,000	2,056,000
Total for Fund 001-C	713,000	1,343,000	2,056,000

Total Program 040	1,877,000	3,533,000	5,410,000
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